



## SEE ME IN 2023 CLINIC SET UP GUIDE

The “See Me in 2023” project goal is to increase representation of the disability community in talent firms across the world . We can not continue to make strides in representation in advertising and media without ensuring brands have access to talent.

This Year, Changing the Face of Beauty is challenging the disability community and brands to come together for one day and photograph at minimum 500 people with disabilities around the world, providing them with professional headshots and empowering them to push for representation.

**We believe brands have the ability to change the future of the disability community by valuing them as a consumer in their advertising, and it is our mission to ensure they have the access to the talent.**

This guide will walk you through the necessary steps to organize a See Me in 2023 Headshot Clinic in your city.



## GETTING STARTED:

Thank you for your interest in organizing a Changing the Face of Beauty See Me in 2023 Headshot Clinic! This year is going to be a year to remember because of you! Below, you will find everything you need to successfully organize a clinic in your city. If you have any questions, please feel free to contact Changing the Face of Beauty at: [clinic@changingthefaceofbeauty.org](mailto:clinic@changingthefaceofbeauty.org).

## SEE ME IN 2023 PRE-CLINIC CHECKLIST:

To ensure you have covered everything prior to your See Me in 2023 Headshot Clinic, please complete the below checklists.

### TO BE COMPLETED BEFORE CLINIC IS APPROVED:

- Secure location to hold photo shoot.
- Find a professional photographer(s) who is willing to donate their time to capture and edit high-resolution images of participating models, and deliver them to the models and CTFOB for promotional use.
- Have photographer(s) complete the Changing the Face of Beauty Photography Agreement Contract (included with this information packet).
- Determine the date and time for this photo shoot. In the past, successful clinics have set aside 4-6 hours to complete photos for each model.
- Submit the See Me in 2023 Clinic Organizer Application with time and location, photography contract(s), and list of volunteers to Changing the Face of Beauty at: [clinic@changingthefaceofbeauty.org](mailto:clinic@changingthefaceofbeauty.org).

### TO BE COMPLETED 30 DAYS PRIOR TO CLINIC:

Once your application has been received and approved, we will release a web page dedicated to your See Me in 2023 Headshot Clinic. You will be able to use this web page to promote, as well as, register models for your headshot clinic. We require each model to donate \$25.00 to participate. This will be collected at registration. With this donation all models will receive images from the shoot to use for their own portfolio!

- Promote your clinic and have models register online. *Due to time constraints, we are capping clinic registrations at 30 models.*

**NOTE:** When a model registers, you will receive an email notification of their registration. **ALL REGISTRATIONS MUST BE COMPLETED 2 WEEKS PRIOR TO SCHEDULED CLINIC DATE.**



## TO BE COMPLETED WITHIN A WEEK OF CLINIC:

The big day is right around the corner! At this point, we will have sent you a spreadsheet of all of your model registrations so you can contact your models. The following checklist will help you make sure you have everything ready the day of your See Me in 2023 Headshot Clinic.

- Contact your models and their guardians to schedule a time for their shoot.
- Once all your models have scheduled their time slot, print the schedule and bring it your clinic.
- Contact local talent agencies and news stations to let them know about your clinic.
- Create signage for your clinic so participants know where to find you.
- Bring snacks and water for your participants and their families.
- HAVE FUN!!!

## TO BE COMPLETED AFTER CLINIC:

You did it! You successfully helped Changing the Face of Beauty change the world! Now that your clinic is over, there's just a few more things that need to be accomplished:

- Send all of your models a thank you for participating in your clinic and let them know that their hi-res images will be sent to them within the next 2 weeks. (There's an example email for you to use for inspiration later in this guide.)
- Get image download links from your photographer(s) and have them send to each of your participants.
- Have your photographer(s) send [clinic@changingthefaceofbeauty.org](mailto:clinic@changingthefaceofbeauty.org) an email with a link to all the photography from your event.



## **ADDITIONAL INFO:**

### **FINDING PHOTOGRAPHERS:**

The first step you want to accomplish is finding either one or more photographers for your event. These photographers would be donating their time and will not be paid. In return for their donation of time, the photographers are getting awesome media coverage for their involvement. They will also be making connections with families which can produce a ton of future business. Since these photographers will be donating their time, we ask that you respect the amount of time they choose to provide as well as provide them refreshments for their kindness.

As an example, one Headshot Clinic had four photographers donate a total of 22 hours (not counting editing and creating galleries afterwards). They each had one model every half hour: twenty minutes of pictures, ten for transition.

Make sure you agree on what they will do for each participant: previous photographers had agreed that each participant would get the digital rights for up to ten edited photographs. Work with the photographer(s) to work these details out. This number of photos will usually depend on how many photographers you have at the event.

Work with CTFOB to get contracts to your photographers and send request for background check info. Do this early on, if possible. It will make things less stressful as your event gets closer.

### **FINDING A LOCATION:**

Previous coordinators have picked an iconic place that represents their city, but photographers love any location that provides good lighting! We highly recommend hosting your clinic at a location that is still usable if there is poor weather. Since this is a one day event, we are not able to reschedule clinics. It's also important that the location has nearby restroom facilities. Once you have a list of possible locations, reach out to them to see if they would be interested in donating space for this AWESOME cause.

### **PROMOTE YOUR CLINIC AND FIND PARTICIPANTS:**

To promote your clinic, start by contacting all local disability organizations and ask them to share your event information. CTFOB will also help you promote the event via Facebook as well as our newsletter. A graphic will be created for your event to share with friends on your social sites! You can also Create an email distribution list in your email address book!

Send anyone who is interested the link to your CTFOB event page to have them sign-up as a participant for the event.

**Don't make the mistake of creating a FB Personal Message. Previous coordinators have sent a note to ten friends, and they added friends, who then added their own friends. This created a chaotic scenario where everyone's phones were constantly buzzing off the hook. Avoid letting that happen by getting email addresses or having them go to a created promotional Facebook page.**



## **KEEP YOUR PARTICIPANTS INFORMED:**

You will be bombarded by Facebook messages and emails from people who are already signed up and have questions, or are looking for more info before signing up. It's more efficient to cut them off at the pass by keeping them informed than field dozens of inquiries all day. You can do this by sending your registrants a preliminary FAQ email, or create a Facebook page for all registrants that you will be able to update with new pertinent information. You'll still be bombarded, but it won't be overwhelming! Here's an example of an update from one of our coordinators:

Hi everyone!

Just a quick note to share the attached press release that went out today to all Detroit TV, radio and newspaper contacts. Please feel free to share with your hometown newspapers in case you would like them to feature your child in a local story!

I also have a few updates:

**KATIE DRISCOLL:** The founder and director of CTFOB, is coming on Sunday from roughly 12-2!! She will be taking pictures and videos and distributing the t-shirts. If you are coming scheduled for Saturday, or later on Sunday I will get your t-shirts for you. Just shoot me an email with the shirt size you would like when you get a chance :)

**GROUP PHOTO:** We are hoping to do a group photo with as many of the models as possible on Saturday at 4pm. If you are scheduled for Saturday and are able to come back, please meet us back at the Belle Isle casino parking lot at 5:45pm. We may later move to a location for a skyline photo but will let you all know prior.

**TALENT AGENCIES:** I will be contacting top modeling and talent agencies in Detroit to invite them to attend. I will send you all information about these agencies in a future email in case you would like to submit photos from this shoot and get your little one involved in modeling or acting!

**OPEN SLOTS:** There are five slots still open, if you know someone that would love to participate. Feel free to forward them the relevant information so that they know what is involved and have them sign up if interested! Have them send me an email, as well, so I can keep them updated.

So looking forward to meeting all of you! Please email, text or call me if you have any questions or concerns or have problems locating the Belle Isle casino parking lot or group shot location this weekend. My cell # is xxx-xxx-xxxx.

Jennifer



## **SEND YOUR PARTICIPANTS A THANK YOU NOTE:**

Lastly, you are going to want to thank all of your participants as well as your photographers and anyone else who participated in this event. You might want to do this in separate emails to each of the groups. Here is an example email from one of our previous coordinators:

Hi!

First of all, a huge THANK YOU to everyone who showed up to make the photo shoot so amazing this weekend! It was such an incredible two days and I feel so privileged to have met so many of you. My Facebook news feed is blowing up with pictures of your gorgeous children and my face hurts from smiling!

**PICTURES:** The photographers told me the turnaround for pictures will be between 1-2 weeks. Will be in touch as soon as the edited albums are finished!

**AGENCIES:** Here is contact information for the top casting and modeling agencies in Detroit:

Productions Plus:  
30600 Telegraph Road  
Suite 2156  
Bingham Farms, MI 48025  
(248) 644-5566 Phone  
<https://www.productions-plus.com/>

Affiliated Group - Gail & Rice  
30700 Northwestern Highway  
Farmington Hills, MI 48334  
TEL: 248) 799 5000  
[entertainment@gail-rice.com](mailto:entertainment@gail-rice.com)  
[newtalent@gail-rice.com](mailto:newtalent@gail-rice.com)

These agencies are safe and legitimate. PLEASE do not take your children to any agency that asks you for money up front! This is a scam. Agents take a percentage of whatever your child earns and, under no circumstances, should ask you for money - unless it is to pay professional photographs, which you will already have. I'm not sure if things have changed over the years but there may also be an up front expense to have composite cards, or "comps", printed. Hoping most of that is done online now so you can save your money!

Please consider signing your children to agencies so local businesses have the option of hiring them! Every single one of them did a rock-star job for the photographers!

Jennifer

**THANK YOU FOR YOUR INTEREST IN HOSTING A SEE ME IN 2023  
HEADSHOT CLINIC! WE LOOK FORWARD TO WORKING WITH YOU!**



# SEE ME IN 2023 HEADSHOT CLINIC ORGANIZER APPLICATION:

To apply to be a See Me in 2023 Headshot Clinic Organizer, please submit the below completed application as well as the photographer contracts included with this guide packet to [clinic@changingthefaceofbeauty.org](mailto:clinic@changingthefaceofbeauty.org)

## ORGANIZER:

Name: \_\_\_\_\_

Email: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

## PHOTOGRAPHER(1):

Name: \_\_\_\_\_

Email: \_\_\_\_\_

Website: \_\_\_\_\_

Phone Number: \_\_\_\_\_

## PHOTOGRAPHER(2):

Name: \_\_\_\_\_

Email: \_\_\_\_\_

Website: \_\_\_\_\_

Phone Number: \_\_\_\_\_

PROPOSED CLINIC DATE: \_\_\_\_\_

## LIST OF VOLUNTEERS:

Name: \_\_\_\_\_

Email: \_\_\_\_\_

Name: \_\_\_\_\_

Email: \_\_\_\_\_

Name: \_\_\_\_\_

Email: \_\_\_\_\_

## PHOTO SHOOT LOCATION:

Name of Location:

\_\_\_\_\_

Address of Location:

\_\_\_\_\_

\_\_\_\_\_

Handicap Accessible? (Y/N): \_\_\_\_\_

Please scan and email this completed form to [clinic@changingthefaceofbeauty.org](mailto:clinic@changingthefaceofbeauty.org)

**IMPORTANT:** We require each model to donate \$25.00 to participate. This will be collected at registration.

The photographer contracts must be signed before the event is launched. We carry the insurance for the shoot and location.



## PHOTOGRAPHY/VIDEO SERVICES AGREEMENT

This Agreement is entered into as of the \_\_\_\_\_ day of \_\_\_\_\_, 201\_, between, Changing The Face Of Beauty ("CTFOB") and \_\_\_\_\_, ("Photographer").

### 1. Services.

**(a) Description and Requirements.** Photographer/Videographer will provide to CTFOB the photography and/or video recording services described in Exhibit A (the "Services"), using Photographer's materials, equipment, tools, insurance, supervision, and labor (unless specified otherwise in this Agreement). CTFOB may buy Services without further documents or by using a purchase order, service order, project agreement, or other document (each an "Additional Purchase Document" or "APD"). This Agreement governs APDs, but we may omit, add, or change parts of this Agreement with respect to Services covered by an APD by saying so in the APD.

**(b) Specifications.** The Services must conform to the quality and service standards included or referenced in this Agreement and Exhibit A hereto ("Specifications"). With respect to quality, it is of the essence of this Agreement that the Services rendered and the Deliverables produced hereunder are in all respects of first-rate professional quality and technically equal to current industry standards, all subject to CTFOB's approval and acceptance, which shall not be unreasonably withheld.

CTFOB may change the Specifications at any time by notifying Photographer, and Photographer must comply with the changed Specifications immediately after notice. Photographer must tell CTFOB promptly if a Specification change affects Photographer's costs or ability to deliver Services on time, and if CTFOB asks Photographer to proceed under the changed Specifications anyway, we will negotiate a fair adjustment to the price or schedule.

2. Independent Contractor. Photographer acknowledges that he/she is an independent contractor and not an employee of CTFOB. As such, neither Photographer nor any employee or subcontractor of Photographer shall have any claim against CTFOB for vacation pay, sick leave, retirement benefits, social security, worker's compensation, health or disability benefits, unemployment benefits or employee benefits of any kind. Photographer acknowledges that CTFOB shall also have no obligation to pay any medical bills for any injuries sustained by Photographer or any employee or subcontractor of Photographer in connection with the work performed for CTFOB by Photographer; Photographer represents that he/she has his/her own health insurance or other adequate financial arrangements to pay for such medical bills. Photographer shall not represent him/herself to any third party as being an employee of CTFOB.
3. Duties, Term and Compensation. CTFOB will pay Photographer the fees and expenses in Exhibit A or an APD (the "Fees") in exchange for satisfactory Services. Photographer will bill CTFOB as set forth on Exhibit A. CTFOB will pay each correct bill within 30 days of receiving it. CTFOB will not reimburse Photographer for time spent traveling to and from CTFOB. CTFOB will not withhold any taxes on amounts paid to Photographer, and all federal, state and local taxes will be Photographer's responsibility to pay. CTFOB is a non-profit organization exempt from the payment of Illinois sales and use taxes, and CTFOB will not reimburse Photographer for any such taxes. Photographer is responsible for requesting and obtaining all required tax exemption numbers. In the event Photographer provides assistants, whether employees or independent contractors, Photographer represents



and warrants that such individuals shall possess the appropriate level of expertise required to provide the Services and all shall be informed in writing that such individuals' services are being provided on a work made for hire basis consistent with the terms and provisions of this Agreement. All costs and expenses associated with such assistants shall be included in the payment set forth in Exhibit A and CTFOB shall not be responsible for any additional payments for the same.

4. Compliance with Laws, Rules, Regulations, and Collective Bargaining Agreements. Photographer will comply with all applicable federal, state and local laws and regulations at all times that Photographer is working on behalf of CTFOB. If applicable, Photographer agrees to comply with all rules, regulations, and requirements of any applicable collective bargaining agreement with any union representing persons employed or contracted by CTFOB.
5. Right to Terminate. CTFOB shall have the right to immediately terminate this Agreement for any reason with or without cause. In the event of such termination, CTFOB shall pay Photographer in accordance with this Agreement for work completed up to the termination, less any damages or other expenses incurred by CTFOB and arising from Photographer's performance.
6. Inventions and Intellectual Property Rights. Photographer agrees that any copyrightable work (including photographs, videotapes, or any other deliverables hereunder ("Deliverables")), developed by Photographer solely, or with others, in connection with the performance of this Agreement shall be deemed a "Work Made for Hire." The parties agree that CTFOB shall own such Deliverables and all intellectual property rights in and to the Deliverables, including copyright and other intellectual property rights, and Photographer irrevocably and unconditionally conveys, assigns and transfers to CTFOB, without any additional consideration, all of his/her rights, title and interest in the Deliverables. Photographer agrees that it retains no rights whatsoever in the Deliverables. Photographer will provide CTFOB with any assistance it may require to obtain copyright registrations, including execution of any documents submitted by CTFOB. To the extent that Photographer has intellectual property rights in technology contained in any of the Deliverables, Photographer grants CTFOB a royalty free, paid-up, worldwide, non-exclusive license to use such technology in connection with the Deliverables.
7. Warranty for Intellectual Property. Photographer represents and warrants to CTFOB that the Deliverables are original creations and do not infringe the property or intellectual property rights or contractual rights of any third parties, and that Photographer has obtained all consents, permits and approvals required to comply with all laws, rules and regulations applicable to Photographer's work under this Agreement.
8. Indemnification and Confidentiality. Photographer shall indemnify, defend and hold harmless CTFOB, its affiliates and their respective trustees, agents, representatives and employees from any and all claims, costs, judgments, losses, liabilities, fines or penalties, including but not limited to attorneys fees, arising from workers' compensation claims of Photographer's employees, Photographer's negligence, wrongful acts, violations of laws or breach of this Agreement. Photographer waives any rights it may have to subrogation from or against CTFOB. Photographer agrees that CTFOB shall not be responsible for any physical damage occurring to property owned, leased or rented by Photographer.

Photographer agrees that any information of CTFOB obtained by him/her while performing services hereunder shall remain confidential and shall not be disclosed to third parties without the prior consent of CTFOB.

9. Insurance. Photographer, at its expense, agrees to maintain during the term of this Agreement the following insurance coverages in amounts of not less than:

Comprehensive General Liability: \$1,000,000 each occurrence

Automobile Liability: \$1,000,000 each accident (If photographer does not carry a business automobile policy, the declarations page of the auto policy for the car(s) that will be on campus is required).

Employer's Liability: \$100,000 each occurrence, \$500,000 annual aggregate\*

Workers' Compensation: Statutory\*

\* If Photographer is a sole proprietor or otherwise not required by law to carry workers compensation, Photographer certifies that in lieu of workers compensation, Photographer has health insurance to cover him/herself, and anyone Photographer hires to provide services to CTFOB, on Photographer's behalf, to meet any and all needs for payment of medical costs for any injuries occurring on campus or arising out of the services or products Photographer is providing. Photographer acknowledges CTFOB will not be responsible for any medical expenses incurred as a result of or in conjunction with the services or products Photographer is providing.

Please initial here if Photographer is not required by law to carry workers compensation: \_\_\_\_\_

CTFOB shall be named as an additional insured for all these coverages. Photographer must provide CTFOB with a certificate evidencing this insurance coverage no later than the effective date of this Agreement. Photographer warrants and represents that each of its owners, employees and partners carry individual health insurance to cover any injuries sustained in conjunction with providing services under this Agreement.

10. Consent to Background Check. Photographer acknowledges that he/she, and anyone that he/she hires to provide services to CTFOB, will be photographing children, including special needs children. Photographer represents and warrants that neither he/she, nor to the best of his/her knowledge, anyone hired by him/her to provide services to CTFOB, has been arrested or accused of any sex-related crime, possession of a controlled substance with the intent to sell, contributing to the delinquency of a minor, or any crime involving moral turpitude. Photographer consents, and shall cause anyone he/she hiresto provide services to CTFOB to consent, to CTFOB conducting one or more criminal background checks as it deems appropriate during the term of this Agreement.

11. Governing Law, Non Waiver, Headings, Entire Agreement and Severability. In the event of a conflict between the body of this Agreement and Exhibit A, this Agreement shall govern. No amendment to any provision of this Agreement shall be effective unless in writing and signed by each party. This Agreement constitutes the entire understanding and Agreement between the parties and supersedes all prior written or oral agreements or understandings existing between the parties concerning the subject matter hereof. Sections 2, 6, 7, 8 and 9 of this Agreement shall survive the expiration or termination of this Agreement. This Agreement shall be governed by the laws of the Commonwealth of Pennsylvania, excluding choice or

conflict of laws principles. Any legal action or proceeding with respect to this Agreement must be brought in the federal or state courts located in Chicago, Illinois. Photographer irrevocably consents to the service of process in any such action or proceeding by the mailing of copies thereof by registered or certified mail to Photographer at the address set forth on Exhibit A. No waiver shall be valid unless in writing and signed by the parties. The terms of this Agreement are severable and if any term or provision is found by a court of competent jurisdiction to be illegal or unenforceable, the remaining provisions shall remain in force.

In witness whereof the parties hereto set their hands as of the date first above written:

**PHOTOGRAPHER:**

**CHANGING THE FACE OF BEAUTY:**

By: \_\_\_\_\_

By: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

**Exhibit A**

**Photographer:**

Name: \_\_\_\_\_ Individual's SSN or EIN: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_ Email Address: \_\_\_\_\_

**Term:**

Commencing on \_\_\_\_\_, 20\_\_\_\_ and ending upon completion of Photographer's duties or earlier termination by CTFÓB. This Agreement may be extended by mutual written agreement.

**Compensation:**

**Payment:**

CTFOB will pay the Photographer the sum of \$ \_\_\_\_\_ in installments (or lump sum) as follows (standard payment terms are Net 30):

or

Payment Not to exceed: \_\_\_\_\_ at a rate of \$ \_\_\_\_\_

**Duties:**

Photographer will perform the following duties:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**PHOTOGRAPHER:**

**CHANGING THE FACE OF BEAUTY:**

By: \_\_\_\_\_

By: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

**Exhibit B**

**PHOTO/VIDEO RELEASE FORM**

Date of \_\_\_\_\_

**Photograph/Recording**

Event Name: \_\_\_\_\_ Location: \_\_\_\_\_

Name of Photographer: \_\_\_\_\_

I hereby irrevocably grant Changing The Face Of Beauty, its licensees, agents, successors and assigns, the right but not the obligation, in perpetuity throughout the world and in all media, now or hereafter known, to use (in any manner it deems appropriate, and without limitation) in and in connection with the photo/video project, by whatever means exhibited, advertised or exploited: my appearance in the video, still photographs of me, recordings of my voice taken or made of me by it, any music sung or played by me, my actual or fictitious name, and any quotes or testimonials given by me.

Furthermore. I understand that during my participation in the photo/video project. I may be exposed to a variety of hazards and risks, foreseen and unforeseen, that may include, but are not limited to, personal injury, property damage and death. To the fullest extent allowed by law. I agree to waive, discharge claims and release Changing The Face Of Beauty its officers, directors, employees, agents and leaders from any and all liability on account of, or in any way resulting from injuries or damages associated with my participation. I understand and intend that this assumption of risk and release is binding upon my heirs, executors, administrators and assigns, and includes any minors accompanying me on the project.

**I affirm that I am 18 years of age or older.**

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name (Witness): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_